

the roller. The pressure of the tourniquet was gradually diminished until taken away altogether, whilst, at the same time, the bandage was daily more tightened. Pulsation in the tumour has much decreased before the tourniquet was taken off; but this result was considerably assisted by the bandage.

On April 22 (thirty-first week), the patient was ordered to move about; and, on May 2, compression having been continued for *eight months*, he was considered well-enough to be discharged with caution; the bandage still applied, though with a moderate degree of pressure. The artery may be said to be almost in its normal condition, with the exception of slight induration.—*Lancet*, May 27, 1854.

39. *New Mode of treating Ulcers from Irritation of the Nails.*—Mr. URE made some observations on this subject before the Harveian Society (March 2, 1854). He referred to the case of a young woman, aged twenty-three, who had been under his care in St. Mary's Hospital. Four months before her entrance, the great toe of the right foot became uneasy and swollen, the patient having pared the nail the day preceding. Ere long, a painful and irritable sore made its appearance by the side of the nail, which discharged from time to time a quantity of thick, bloody, and sometimes black-looking matter. She was thus disabled from going about and earning her livelihood. For four years antecedent, she had been in indifferent health, and had suffered from excessive flow of the catamenia. She had procured the advice of some respectable practitioners, and been under treatment during several weeks, without, however, obtaining any benefit. As the sore was rather in an inflamed state on her admission, poultices were applied. On the third day, when all surrounding inflammation seemed to have subsided, Mr. Ure prescribed the use of a salve composed of one grain of finely levigated arsenious acid, incorporated with an ounce of spermaceti ointment. He was led to try this remedy by the suggestion of Mr. Copeland, who deemed it almost a specific in ulcers of this nature. This was steadily employed for about ten days, without producing any marked change on the sore. Mr. Ure then ordered, instead, the continuous application of a hot saturated solution of alum. This induced rapid absorption of the thickened parts, and prompt cicatrization of the ulcerated surface, so that the patient was enabled to leave the hospital, cured, in the course of three days. Mr. Ure observed that, while alum is soluble in five parts of water at  $60^{\circ}$  Fahr., it is soluble in little more than its own weight of water at the boiling temperature. A hot saturated solution is, consequently, more energetic in its action than a cold one. He had been led to resort to its use in the above instance, from having witnessed its efficacy in an analogous case. A gentleman consulted him (Mr. Ure) in the autumn of 1852, concerning a sore seated by the side of the nail of the great toe, which had annoyed him for nearly a year. A variety of treatment had been exhausted in vain attempts at cure, including the plan proposed by Sir A. Cooper, of paring the nail as thin as possible, raising the edge, and inserting a small piece of lint between it and the sore; the free application of lunar caustic, as recommended by Mr. Wardrop; and also blistering the part. By the constant application of a saturated solution of alum, as hot as could be borne, this refractory sore was eventually healed in a few days.

40. *Gunshot Wound inflicted by the Minie Rifle.*—Mr. TUFNELL communicated to the Surgical Society of Ireland (March 11, 1854), the particulars of a case, which, he said, was at present of rare occurrence, but one he feared that was likely before long to become very common indeed. Its rarity just now, however, must make it interesting to the surgical profession, and for that reason he was induced to bring it under the notice of the Surgical Society.

The cast, which lay on the table, was taken from the foot of a boy, æstat. 16, who was accidentally wounded by a shot from a Minie rifle, while the troops were practising at the Pigeon House, on the 25th of July last, and admitted into the City of Dublin Hospital the same day. The case was useful in showing the great difference between a wound inflicted by a conical piece of lead, as propelled from a Minie rifle, and the round bullet fired from a musket. The

nature of the injury was represented by the cast before the Society. There was a small semilunar split in the integument on the dorsum of the foot, situated over the centre of the metatarsal bone of the little toe, about a quarter of an inch in length, giving an appearance as if the ball had glanced across it, and superficially cut the skin. There was none of the appearance of a gunshot wound, there was no contusion, nor were the edges inverted. The ball passed downwards, fracturing the fourth metatarsal bone, and lodging itself deeply in the sole of the foot, yet leaving no trace of its passage beyond the most trifling slit in the skin, and that so oblique that a probe would not follow the track. It was impossible to discover the position of the ball on admission, and for seven or eight days from the receipt of the injury, no inflammatory action followed. The boy then got out of bed, and walked upon the wounded foot, the consequence of which was that inflammation commenced in the part, and tumefaction of the sole followed. He (Mr. Tufnell) then cut down through the centre of the foot and removed the ball, which was lying on its long axis close up under the metatarsal bone of the great toe. This ball weighed twelve drachms, the weight of the ordinary musket-ball being only eight drachms, making a difference between them of half an ounce. As to the fracturing of the fourth metatarsal bone in this case, there was no doubt about it, for he now exhibited a portion of the metatarsal bone which he extracted along with the ball. If the members present would take the trouble to examine the two balls before them, one of which had been fired and the other not, they would perceive a vast difference in them. The hollow iron cup in the one unfired, lay barely on a level with the base of the cone, whilst in the one which had been fired it was sunk deeply into the lead. This cup acted as a kind of wedge, and drove it more forcibly on. He found that the charge of gunpowder employed to propel a ball of twelve drachms from a Minie rifle was seventy-five grains; whereas in the ordinary musket, seventy grains were used for a ball of only eight drachms. On examining samples of the gunpowder employed, however, he found there was a great difference between them. That used for the Minie rifle was much harder and more highly glazed than the other, and being, therefore, a much finer description of powder, a smaller charge would perhaps be required than of the ordinary powder. The weapon now supplying to the army was a very superior arm to the musket. A soldier with it can fire with the greatest precision at six hundred yards, whilst with the ordinary musket he could not shoot with precision at more than two hundred yards. A man supplied with a Minie rifle, had therefore an immense advantage over one armed only with the common musket, and there was every reason to anticipate that the injuries inflicted by the former would be more severe and dangerous than those caused by the latter. He did not imagine that a shot from a Minie rifle would make a revolution round the body, as happened so often with the old musket-ball. His impression was, that if a Minie shot struck with force against the cartilage of the ribs, it would go directly through the body and transfix a man like an arrow, instead of passing round and escaping behind at the back. No later than that day, he saw a case illustrative of the latter, which was produced in the following manner: A deserter, observing that the escort in charge of him were drunk, attempted to escape. Two or three of the soldiers pursued and caught him; one man very drunk run up, and although the others held him securely, fired his musket into him; the ball struck upon a rib, ran round to the spine, and got exit there. That man would probably recover; but if it had been a Minie ball that was fired at him, he would assuredly have been killed.—*Dublin Medical Press*, March 29, 1854.

41. *Dislocation of both Femora at the same time in the same Subject.*—H. L. PRICHARD, Esq., relates (*Assoc. Med. Journ.* April 21, 1854) the following example of this accident:—

“Thomas Phillips, aged 15, a railway wagger at the Cwmavon works, on the evening of the 25th of March, while in a stooping posture in the act of turning the switch, was overtaken and knocked down by a truck running with some velocity down an inclined plane. He escaped the wheels; but the body of the